

*11/11/1998*

**PATENT APPLICATION FEE DETERMINATION RECORD**

Effective November 10, 1998

Application or Docket Number

*09/36189*

**CLAIMS AS FILED - PART I**

(Column 1)

(Column 2)

SMALL ENTITY  
TYPE

OTHER THAN  
SMALL ENTITY

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	<i>22</i>	minus 20= * <i>2</i>
INDEPENDENT CLAIMS	<i>5</i>	minus 3 = * <i>2</i>
MULTIPLE DEPENDENT CLAIM PRESENT		

RATE	FEES	RATE	FEES
	380.00		760.00
X\$ 9=		X\$18=	<i>36</i>
X39=		X78=	<i>156</i>
+130=		+260=	—
TOTAL		TOTAL	

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

(Column 1)

(Column 2)

(Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus	**	=
Ind. pending	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

SMALL ENTITY

OTHER THAN  
SMALL ENTITY

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		X\$18=	
X39=		X78=	
+130=		+260=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		X\$18=	
X39=		X78=	
+130=		+260=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus	**	=
Ind. pending	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		X\$18=	
X39=		X78=	
+130=		+260=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

**This Form is for INTERNAL PTO USE ONLY**  
**It does NOT get mailed to the applicant.**

**NOTICE OF FILING / CLAIM FEE(S) DUE  
(CALCULATION SHEET)**

APPLICATION NUMBER: 09/361,829

**Total Fee Calculation**

Fee Code	Total # Claims	Number Extra X	Fee	Fee		Total
				Sm./Lg.	Sm. Entity	
Basic Filing Fee	<u>201/101</u>		<u>380</u>	<u>380</u>	<u>960</u>	<u>960</u>
Total Claims >20	<u>203/103</u>	<u>22</u>	<u>-20 = 2</u>	<u>2</u>	<u>18</u>	<u>36</u>
Independent Claims >3	<u>202/102</u>	<u>5</u>	<u>-3 = 2</u>	<u>2</u>	<u>78</u>	<u>156</u>
Mult. Dep Claim Present	<u>204/104</u>		<u>130</u>	<u>130</u>	<u>260</u>	<u>260</u>
Surcharge	<u>205/105</u>		<u>65</u>	<u>65</u>	<u>130</u>	<u>130</u>
English Translation	<u>139</u>					

**TOTAL FEE CALCULATION**

1062

Fees due upon filing the application:

Total Filing Fees Due = \$ 922

Less Filing Fees Submitted - \$ 9

BALANCE DUE = \$ 1082

CH/WH/PTO

Office of Initial Patent Examination